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FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Council of Life Insurers Political Action Committee 101 Constitution Ave., NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20001 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00147066 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 03 0 1 2006 03 3 1 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr. Donald L. Walker Type or Print Name of Treasurer Electronically Filed by Mr. Donald L. Walker 04 13 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name American Council of Life Insurers Political Action Committee [®] D " D 03 0 1 2006 0.3 3 1 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 57647.24 [°]2006 January 1 (b) Cash on Hand at 63299.60 Begining of Reporting Period 24940.66 55088.02 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 88240.26 112735.26 6(a) and 6(c) for Column B) 56808.69 81303.69 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 31431.57 31431.57 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

(subtract Line 18(c) from Line 19)

American Council of Life Insurers Political Action Committee

0 1 3^D1 М М М М 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 6416.94 12061.01 (i) Itemized (use Schedule A) 6023.72 10527.01 (ii) Unitemized (iii) TOTAL (add 12440.66 22588.02 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 12500.00 32500.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 24940.66 55088.02 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 24940.66 55088.02 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts

24940.66

55088.02

(subtract Line 21(a)(ii) from Line 30(a)(ii)

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures..... (c) Total Operating Expenditures 0.00 0.00 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 56308.69 80308.69 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 500.00 995.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 56808.69 81303.69 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements

56808.69

81303.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	24940.66	55088.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	24940.66	55088.02
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 30 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Council of Life Insurers Politic	al Action (Committee	
۹.	Full Name (Last, First, Middle Initial) Mr. Michael J. Bartholomew Mailing Address 101 Constitution Avenue	, NW		Date of Receipt
	Suite 700 West City	State	Zip Code	Transaction ID: PR77136285919
	Washington	DC	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			100.00
	Name of Employer American Council of Life Insurers Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Senior Co Aggregate		P/R Deduction (\$50.00 Sem-i-Monthly)
Full Name (Last, First, Middle Initial) Gene Patrick Berry Mailing Address 2301 Brambleton Avenue, SW				Date of Receipt
				03 15 2006
	City	State	Zip Code	Transaction ID: 13410978
	Roanoke FEC ID number of contributing federal political committee.	C	24015-4701	Amount of Each Receipt this Period 365.00
	Name of Employer Shenandoah Life Insurance Company Receipt For:		n ce President e Year-to-Date	
	Primary General Other (specify) ▼		365.00	
D .	Full Name (Last, First, Middle Initial) Ms. Linda H. Cunningham			Date of Receipt
	Mailing Address 101 Constitution Avenue Suite 700 West	, NW		M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR77136245919
	Washington	DC	20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.				100.00
	Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify)		n g Dir., Conference Developm e Year-to-Date ▼ 300.00	P/R Deduction (\$50.00 Sem-i-Monthly)
S	UBTOTAL of Receipts This Page (optional)			565.00
т	OTAL This Period (last page this line number on	lv)		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/30
	EMIZED RECEIPTS		or each category of the	(check only one)
THE MILE OF THE			Detailed Summary Page	X 11a 11b 11c 12
Δ.	ny information copied from such Reports and State	omonto mov	, not be cold or used by any person	13 14 15 16 17
or	for commercial purposes, other than using the na	ime and ado	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Council of Life Insurers Politica	al Action (Committee	
A.				Date of Receipt
	Mailing Address 101 Constitution Avenue, NW Suite 700 West			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR77139515919
	Washington	DC	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			313.54
	Name of Employer American Council of Life Insurers	Occupation Senior Vi	n ce President, Federal Relatio	
	Receipt For:		Year-to-Date ▼	
	Primary General		940.62	P/R Deduction (\$156.77 Se-
	Other (specify) ▼	0 0	940.02	mi-Monthly)
В.	Full Name (Last, First, Middle Initial) Mr. J. Bruce Ferguson			Date of Receipt
	Mailing Address 101 Constitution Avenue,	, NW		M M / D D / Y Y Y Y
	Suite 700 West	State	Zip Code	
	Washington	DC	20001-2133	Transaction ID: PR77137325919 Amount of Each Receipt this Period
	•		20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		224.28
	Name of Employer American Council of Life	Occupation		
	Insurers		ce President, State Relations	<u>8 </u>
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		672.83	P/R Deduction (\$112.14 Se- mi-Monthly)
_	Full Name (Last, First, Middle Initial)			Data of Daggint
C.	Mr. John P. Gerni Mailing Address 101 Constitution Ave, NV	N/		Date of Receipt
	Suite 700	V		M M / D D / Y Y Y
	City S Washington D		Zip Code	Transaction ID: PR77142875919
			20001-2133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C		100.00
	Name of Employer American Council of Life		1	7
Insurers Senior Let Receipt For: Aggregate		Senior Le	egislative Director	
		Year-to-Date ▼		
Primary General		300.00	P/R Deduction (\$50.00 Sem-	
	Other (specify) ▼		333.33	i-Monthly)
S	UBTOTAL of Receipts This Page (optional)			637.82
I T	OTAL This Period (last page this line number only	lv)	>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 30
ITEMIZED RECEIPTS		or each category of the	(check only one)	
"	LIMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
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or	ny information copied from such Reports and Stateme for commercial purposes, other than using the name	and add	rnot be sold or used by any person Iress of any political committee to so	blicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Council of Life Insurers Political A	ction C	Committee	
	Full Name (Last, First, Middle Initial)			B
Α.		A /		Date of Receipt
	Mailing Address 101 Constitution Avenue, NV Suite 700 West	/V		M M / D D / Y Y Y Y
		tate	Zip Code	Transaction ID: PR77141935919
	•	C	20001-2133	Amount of Each Receipt this Period
	FFO ID worth and for additional			
federal political committee.			76.08	
	Name of Employer American Council of Life	cupatior	1	
	Insurers Vic	e Pres	sident, Taxes	
		gregate	Year-to-Date ▼	
	Primary General	1	228.25	P/R Deduction (\$38.04 Sem-
	Other (specify)	0 0	220.20	i-Monthly)
_	Full Name (Last, First, Middle Initial)			8. (8
В.				Date of Receipt
	Mailing Address 101 Constitution Ave, NW Suite 700 West			M M / D D / Y Y Y
		tate	Zip Code	Transaction ID: PR77143525919
	•	C	20001-2133	Amount of Each Receipt this Period
	FFO ID assert as a face of the first	1 '		
	federal political committee.			100.00
	Name of Employer	a a a ti a s		
	American Council of Life	cupatior	Outreach	
	insurers		Year-to-Date ▼	
	Primary General	19.094.0		P/R Deduction (\$50.00 Sem-
	Other (specify)		300.00	i-Monthly)
_				
C.	Full Name (Last, First, Middle Initial) Mr. Gary E. Hughes			Date of Receipt
٠.	Mailing Address 101 Constitution Avenue, NV	N		M M / D D / Y Y Y Y
Suite 700 West				
		tate	Zip Code	Transaction ID: PR77135825919
	<u>Washington</u>	<u>C </u>	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee			260.00
federal political committee.				
Name of Employer American Council of Life Occupation		1		
American Council of Life Insurers Executive		Vice Pres & General Counse		
		Year-to-Date ▼		
	Primary General	-	780.00	P/R Deduction (\$130.00 Se-
	Other (specify) ▼	0 0	700.00	mi-Monthly)
Г				400.00
s	UBTOTAL of Receipts This Page (optional)		>	436.08
-	OTAL This Paried (last page this line number and)			
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 9/30				
			Use separate schedule(s) or each category of the	(check only one)				
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12				
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An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.				
$\overline{}$	NAME OF COMMITTEE (In Full)							
\rangle	American Council of Life Insurers Politic	al Action (Committee					
۹.	Full Name (Last, First, Middle Initial) Mr. Michael J. Hunter			Date of Receipt				
	Mailing Address 101 Constitution Avenue Suite 700 West	, NW		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR77141985919				
	Washington	DC	20001-2133	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.			416.66				
	Name of Employer American Council of Life Insurers	Occupation Executive	n e Vice President & COO					
	Receipt For:		e Year-to-Date ▼					
	Primary General Other (specify) ▼		1249.98	P/R Deduction (\$208.33 Semi-Monthly)				
Full Name (Last, First, Middle Initial) 3. Mr. Gregory F. Jenner				Date of Receipt				
Mailing Address 101 Constitution Avenue No Suite 700		· Nw		M M / D D / Y Y Y Y				
	City		Zip Code	Transaction ID: PR77525895919				
	Washington	DC	20080-0001	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		390.00				
	Name of Employer American Council of Life Insurers	Occupation Executive	n e Vice President, Taxes					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	1170.00	P/R Deduction (\$195.00 Semi-Monthly)				
 C.	Full Name (Last, First, Middle Initial) Frank Keating			Date of Receipt				
	Mailing Address 101 Constitution Avenue Suite 700 West	, NW		M M / D D / Y Y Y Y				
	City	State	Zip Code	Transaction ID: PR77141975919				
	Washington	DC	20001-2133	Amount of Each Receipt this Period				
American Council of Life Insurers Presider		C		416.66				
		Occupation						
		e Year-to-Date ▼	\dashv					
	Primary General Other (specify) ▼	Aggregate	1249.98	P/R Deduction (\$208.33 Semi-Monthly)				
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T	FOTAL This Period (last page this line number only)							

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 10/30
ITEMIZED RECEIPTS		or each category of the	(check only one)	
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or	ny information copied from such Reports and State for commercial purposes, other than using the nan	ne and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	American Council of Life Insurers Political	Action (Committee	
	Full Name (Last, First, Middle Initial)			5
Α.	Mr. David M. Leifer	.		Date of Receipt
	Mailing Address 101 Constitution Avenue, Suite 700 West	NW		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR77137405919
	Washington	DC	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		94.58
	Name of Employer American Council of Life	Occupation	า	1
	American Council of Life Insurers	Senior Co	ounsel	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	283.75	P/R Deduction (\$47.29 Sem-
	Other (specify)	1 1	200.70	i-Monthly)
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 8305 20th Avenue NW			03 24 2006
	City	State	Zip Code	Transaction ID: 13470710
	Seattle	WA	98117-3523	Amount of Each Receipt this Period
			30117 0020	
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Symetra Financial Corpora-	Occupation	1	
	tion L Receipt For:	Aggregate	e Year-to-Date ▼	-
	Primary General	Aggregate	real to Bate 🔻	
	Other (specify) ▼		500.00	
C.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Mahoney			Date of Receipt
	Mailing Address 101 Constitution Avenue,	NW		M M / D D / Y Y Y Y
	Suite 700 West			
	City	State	Zip Code	Transaction ID: PR77142095919
	Washington	DC	20001-2133	Amount of Each Receipt this Period
	FEC ID number of contributing	С		111.50
	federal political committee.			
	Name of Employer American Council of Life	Occupation	า	7
	Insurers	Vice Pres	sident, Communications	
		Aggregate	e Year-to-Date ▼	
	Primary General		334.50	P/R Deduction (\$55.75 Sem-
	Other (specify) ▼	1 1		i-Monthly)
	L			
s	UBTOTAL of Receipts This Page (optional)		>	706.08
	OTAL This Desired (feet seem that the	`		
1 (OTAL This Period (last page this line number only)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 11/30				
			Use separate schedule(s)	(check only one)				
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12				
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An	y information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions				
or	for commercial purposes, other than using the na	me and add	dress of any political committee to	solicit contributions from such committee.				
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)							
\rangle	American Council of Life Insurers Politica	al Action (Committee					
٩.	Full Name (Last, First, Middle Initial) Mr. John W. Mangan, CEBS			Date of Receipt				
	Mailing Address 101 Constitution Ave, NW Suite 700	V		M " M / D " D / Y " Y " Y " Y				
	City	State	Zip Code	Transaction ID: PR77137715919				
	Washington	DC	20001-2133	Amount of Each Receipt this Period				
	•		20001 2100	Amount of Each receipt this remod				
	FEC ID number of contributing federal political committee.	C		200.00				
	Name of Employer American Council of Life	Occupation Regional	n Vice President, State Relation					
	Insurers Receipt For:		Year-to-Date ▼	7				
	Primary General	33 -3		P/R Deduction (\$100.00 Se-				
	Other (specify) ▼		600.00	mi-Monthly)				
	Full Name (Last, First, Middle Initial) Mr. James S. Mellema			Date of Receipt				
٠.	Mailing Address P. O. Box 1625			M M / D D / Y Y Y Y				
	Mailing Address P. O. Box 1625			03 24 2006				
	City	State	Zip Code	Transaction ID: 13470722				
	Binghamton	NY	13902-1625	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		225.00				
	Name of Employer	Occupation	1	7				
	Security Mutual Life Insurance Company	Second V	/ice President - Actuary					
	Receipt For:	Aggregate	Year-to-Date V	7				
	Primary General							
	Other (specify)		225.00					
— Э.	Full Name (Last, First, Middle Initial) Brenda Nation			Date of Receipt				
	Mailing Address 101 Constitution Avenue,	NW		M M / D D / Y Y Y Y				
	Suite 700 West							
	City	State	Zip Code	Transaction ID: PR77141995919				
	Washington	DC	20001-2133	Amount of Each Receipt this Period				
	FEC ID number of contributing			100.00				
federal political committee. Name of Employer Occupation				100.00				
		Occupation	<u> </u>	┥				
	Name of Employer American Council of Life	Senior Co						
111001010		Year-to-Date ▼	1					
	Primary General	33 3		P/R Deduction (\$50.00 Sem-				
	Other (specify) ▼	0 0	300.00	i-Monthly)				
SI	JBTOTAL of Receipts This Page (optional)			525.00				
	22. 27.12 of 1.000/pto 11110 Fago (optional)		······································					
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/30 (check only one) X 11a 11b 11c 12 15 16 17		
Ar or	y information copied from such Reports and Stater for commercial purposes, other than using the nam	ments may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Council of Life Insurers Political	I Action C	Committee			
Α.	Shenandoah Life Insurance	State VA C	Zip Code 24015-4701 n ce President and Chief Actua	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Company			Year-to-Date ▼ 300.00	41		
Full Name (Last, First, Middle Initial) Mr. Maurice Perkins Mailing Address 101 Constitution Ave, NW Suite 700 City State			Zip Code 20001-2133	Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR80514915919 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		DC 20001-2133 C Occupation		Amount of Each Receipt this Period 131.34		
	Insurers		sident, Financial Services Year-to-Date ▼ 394.01	P/R Deduction (\$65.67 Sem-i-Monthly)		
) .	Full Name (Last, First, Middle Initial) Robert R. Peterson, Jr Mailing Address 2301 Brambleton Avenue,	SW		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City			Zip Code	Transaction ID: 13591997		
	Roanoke FEC ID number of contributing federal political committee.	C	24015-4701	Amount of Each Receipt this Period 300.00		
	Shenandoah Life Insurance Company		n ce President, Investments Year-to-Date ▼ 300.00			
s	UBTOTAL of Receipts This Page (optional)		·····	731.34		
T	OTAL This Period (last page this line number only	·)	>			

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/30		
ITEMIZED RECEIPTS			or each category of the	(check only one)		
. 1			Detailed Summary Page	X 11a 11b 11c 12		
Λ.	uninformation assisted from south Boundary (10)		and he had all an or all to a second	13 14 15 16 17		
An or	ly information copied from such Reports and Statel for commercial purposes, other than using the nan	ments may ne and add	not be sold or used by any persol lress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
$\overline{}$	NAME OF COMMITTEE (In Full)					
\rangle	American Council of Life Insurers Political	Action C	Committee			
Δ.	Full Name (Last, First, Middle Initial) Mr. Donald G. Preston Jr.			Date of Receipt		
	Mailing Address 101 Constitution Avenue,	NW		M M / D D / Y Y Y Y		
	Suite 700 West					
	City	State	Zip Code	Transaction ID: PR77138645919		
	Washington	DC	20001-2133	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		144.80		
	Name of Employer American Council of Life	Occupation	1	1		
	American Council of Life Insurers	Managing	Director, Reinsurance			
		Aggregate	Year-to-Date ▼			
	Primary General		434.39	P/R Deduction (\$72.40 Sem- i-Monthly)		
	Other (specify) 🔻	0 0		1-Monthly)		
3.	Full Name (Last, First, Middle Initial) Mr. Ross L. Sargent			Date of Receipt		
Mailing Address 101 Constitution Ave, NW				M M / D D / Y Y Y Y		
Suite 700			7in Oada	PRI 100 100 750 10		
City State Washington DC		DC	Zip Code 20001-2133	Transaction ID: PR112048975919		
		ь	20001-2133	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		83.34		
	Name of Employer American Council of Life	Occupation	1	-		
	American Council of Life Insurers	Senior Co	ounsel			
		Aggregate	Year-to-Date ▼			
	Primary General		238.48	P/R Deduction (\$41.67 Sem-		
	Other (specify)	0 0		i-Monthly)		
 Э.	Full Name (Last, First, Middle Initial) Mr. Juan Carlos Scott			Date of Receipt		
	Mailing Address 101 Constitution Ave, NW			M M / D D / Y Y Y Y		
	Suite 700 West					
	City	State	Zip Code	Transaction ID: PR77142885919		
	Washington	DC	20001-2133	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		C		112.50		
American Council of Life Vice Pre		Occupation	1	1		
			ident, Federal Relations			
		Aggregate	Year-to-Date ▼			
			337.50	P/R Deduction (\$56.25 Sem- i-Monthly)		
	Carlot (Opcorry)	1 1				
s	UBTOTAL of Receipts This Page (optional)			340.64		
			<u> </u>			
T	OTAL This Period (last nage this line number only	·)	•			

21	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 14 / 30		
			Use separate schedule(s)	(check only one)		
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12		
			Detailed Summary Fage	13 14 15 16 17		
An	y information copied from such Reports and Sta	tements may	not be sold or used by any person	n for the purpose of soliciting contributions		
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.		
$\overline{\ }$	NAME OF COMMITTEE (In Full)					
\rangle	American Council of Life Insurers Politic	al Action (Committee			
	Full Name (Last, First, Middle Initial)					
۹.	David C. Turner			Date of Receipt		
	Mailing Address 101 Constitution Ave, N	W		M M / D D / Y Y Y Y		
	Suite 700					
	City	State	Zip Code	Transaction ID: PR77142895919		
	Washington	DC	20001-2133	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		151.66		
	Name of Employer American Council of Life	Occupation		_		
	Insurers		President and Corp Sec.			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify)		454.99	P/R Deduction (\$75.83 Sem- i-Monthly)		
	Other (specify)	1				
	Full Name (Last, First, Middle Initial)					
3.	Ms. Debra K. West			Date of Receipt		
	Mailing Address 101 Constitution Avenue Suite 700 West	e, NW		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR77142105919		
	Washington	DC	20001-2133	Amount of Each Receipt this Period		
	FEC ID number of contributing			100.00		
	federal political committee.	C		100.00		
	Name of Employer	Occupation	n	-		
	American Council of Life Insurers		 ounsel & Director, Southern F	Re		
	Receipt For:		e Year-to-Date ▼			
	Primary General			P/R Deduction (\$50.00 Sem-		
	Other (specify) ▼		300.00	i-Monthly)		
•	Full Name (Last, First, Middle Initial)			Date of Receipt		
J.	Mr. James P. Zachry Mailing Address Tower Life Building			M M / D D / Y Y Y Y		
	Maining Address Tower Life Building			03 29 2006		
City		State	Zip Code	Transaction ID: 13681068		
	San Antonio	TX	78205	Amount of Each Receipt this Period		
	FEC ID number of contributing		0 0 0 0	1000.00		
		C		1000.00		
		Occupation	n	-		
	Tower Life Insurance Comp-	1	n, President & CEO			
	any Receipt For:		e Year-to-Date ▼			
	Primary General					
	Other (specify) ▼		1000.00			
_	LIPTOTAL of Descints This Deep (autions)			1251.66		
3	UBTOTAL of Receipts This Page (optional)		·····			
T	OTAL This Period (last page this line number or	nlv)	L	6416.94		
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 30 (check only one) 11a 11b X 11c 12 13 14 15 16 17			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) American Council of Life Insurers Political	al Action (Committee				
Name of Employer Occupation			Zip Code 94941 0095109 n e Year-to-Date ▼	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Other (specify) ▼ Full Name (Last, First, Middle Initial) AXA Equitable PAC Mailing Address c/o AXA Equitable Life Assurance 1290 Avenue of the Americas			S	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
reactal political committee.		NY	Zip Code 10104 0161901	Transaction ID: 13681076 Amount of Each Receipt this Period 5000.00			
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 5000.00				
Full Name (Last, First, Middle Initial) Penn Mutual PAC Mailing Address Independence Square R2G City State Philadelphia PA				Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
			Zip Code 19172	Transaction ID: 13687368			
FEC ID number of contributing federal political committee.			0142372	Amount of Each Receipt this Period 5000.00			
		Occupation	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00				
s	UBTOTAL of Receipts This Page (optional)			12500.00			
T	OTAL This Period (last page this line number only)						

SCHEDULE B (FECFOIIII 3X)	Use seperate schedule(s)	FOR LINE N		PAGE 16/30				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 23 24 28a 28b 28					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full) American Council of Life Insurers Political	· · · · · · · · · · · · · · · · · · ·							
Full Name (Last, First, Middle Initial) Back America's Conservatives PAC Mailing Address 616 E Street, NW			Transaction ID: 1347 Date of Disbursement	4928 Y 2 0 0 6				
Suite 802	7: 0							
City Washington	State Zip Code DC 20004		Amount of Each Disbu	rsement this Period				
Purpose of Disbursement		011		5000.00				
Candidate Name	(Category/ Type						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)			Transaction ID: 1336	0050				
A Lot of People Who Support Jeff Bingama	an		Date of Disbursement	YYYY				
Mailing Address 110-B East Broad Street			0 3 1 3	Ž O Ö 6				
City Falls Church	State Zip Code VA 22046		Amount of Each Disbu	rsement this Period				
Purpose of Disbursement		011		1000.00				
Candidate Name Jeff Bingaman	(Category/ Type						
X Senate X President	ment For: 2006 Primary General Other (specify)							
State: NM District: 2 Full Name (Last, First, Middle Initial)			Transaction ID: 1347	4960				
Boren for Congress			Date of Disbursement					
Mailing Address P.O. Box 149			03 / 24 /	[°] 2006				
City Okemah	State Zip Code OK 74859		Amount of Each Disbu	rsement this Period				
Purpose of Disbursement		0.1.1		500.00				
Candidate Name Dan Boren		011 Category/ Type						
X	ment For: 2006 Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional)								
TOTAL This Period (last page this line number only)								

TEMES DISCUSSION	Use seperate schedule(s)		check or					-GE	17/3	U	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	$\stackrel{'}{\Box}$ 2	´ —	23 28b	24 28c	П	25 29	ш.	6 0b
Any Information copied from such Reports and State										 ;	_
or for commercial purposes, other than using the nar	ne and address of any political co	ommi	ttee to s	olicit	contribu	utions fro	om such	comn	nittee		
NAME OF COMMITTEE (In Full)											
American Council of Life Insurers Politica	l Action Committee										
Full Name (Last, First, Middle Initial)				Т	ransac	tion ID:	134749	26			
Dave Camp for Congress					ate of	Disburse		· · ·	· V	V	
Mailing Address P.O. Box 423					0,3 ,,	[/] 2	4 ′	2	0 Ď 6		
City Midland	State Zip Code MI 48640			Α	mount	of Each	Disburse	emen	this P	eriod	
	1011 40040			- [1	000.0	0	1
Purpose of Disbursement		01	11	1	-				000.0		4
Candidate Name			gory/								
Dave Camp		Ту	ре								
	sement For: 2006										
Senate Senate	C Primary General Other (specify) ▼										
State: MI District: 4	Caron (openiny)										
Full Name (Last, First, Middle Initial)				Т	ransac	tion ID:	135148	22			_
Gampbell For Congress						Disburse		,			
Mailing Address 4590 Macarthur Blvd. S	uito 500			- [0 3 M	/ D ₂	9 /	Ý Ž	0 0 6	Υ	
Walling Address 4590 Macarthur Bivd. S	uite 500			<u> </u>	,						
City Irvine	State Zip Code CA 92660			Α	mount	of Each	Disburse	emen	this P	eriod	
Purpose of Disbursement	071 02000			1				1	000.0	0	ı
		01	11								ī
Candidate Name Rep. John Campbell			gory/								
	sement For: 2006	Ту	pe								
· -	K Primary General										
President	Other (specify)										
State: CA District: 48											
Full Name (Last, First, Middle Initial)							133609	37			
Steve Chabot For Congress					ate of	Disburse	ement	/ · V	V	V	
Mailing Address 3014 Harrison Ave.					0,3	1	3 ′	2	0 Ď 6		
City	State Zip Code			A	mount	of Each	Disburse	emen	this P	eriod	
Cincinnati Purpose of Disbursement	OH 45211			- [1	000.0	0	1
rulpose of Disbursement		01	11		,						1
Candidate Name		Cate	gory/								
Rep. Steve Chabot		Ту	ре								
· -	sement For: 2006 K Primary General										
President	Other (specify)										
State: OH District: 1											
•				Γ				2	0.00	Λ.	ī
SUBTOTAL of Disbursements This Page (optional)			L	-			31	,,,,,,,	U	1
TOTAL This Period (last page this line number only	Λ		•								

	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use seper	rate schedule(s) ategory of the			OR LI		NUMBE one)	R:			I	PAGE	18/	30	
	EMIZED DISBURSEMENTS		Summary Page			21b 27)	22 28a	X	23 28l	, [24 28	c <u> </u>	25 29	\square	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name														ns	
abla	NAME OF COMMITTEE (In Full)															
$ \rangle$	American Council of Life Insurers Political	Action Cor	mmittee													
Α.	Full Name (Last, First, Middle Initial) Citizens for Action							Trans Date		-	-		296			
	Mailing Address P.O. Box 1535							0 ^M 3	М	/	13	3 /	Y 2	žoŏ	6 ^Y	
	City Wilkes-Barre	State PA	Zip Code 18703					Amou	ınt o	f Ea	ch D	isbur		nt this		_
	Purpose of Disbursement				0	11	1	L.	-	_		_		1000.	00	
	Candidate Name			С		gory/ pe										
	Office Sought: House Disburse Senate President	ement For: Primary Other (spec	General													
	State: District:															
В.	Full Name (Last, First, Middle Initial) Cole for Congress							Trans Date				-	1868			
	Mailing Address 12176 Chancery Station	Circle						0 ^M 3	М	/	2 4	1	Y	ž 0 ŏ	6 ^Y	
	City Reston	State VA	Zip Code 20190					Amou	ınt o	f Ea	ch D	isbur	seme	nt this	Period	_
	Purpose of Disbursement			Г	_		1	L.						1000.	00	
	Candidate Name Tom Cole				ate	11 gory/ pe										
	· -	ement For: Primary Other (spec	2006 General													
	State: OK District: 4		· 													
C.	Full Name (Last, First, Middle Initial) Committee To Elect Artur Davis To Congre	ess						Trans Date					989			
	Mailing Address Post Office Box 1845							0 ^M 3	М	/	1 3	3 /	Y	žoŏ	6 ^Y	
	City Birmingham	State AL	Zip Code 35201					Amou	ınt o	f Ea	ch D	isbur		nt this		_
	Purpose of Disbursement				0	11.	1	L.		-		_		1000.	00	_
	Candidate Name Rep. Artur Davis					gory/ pe										
	Senate X President	ement For: Primary Other (spec	2006 General			_										
_	State: AL District: 7															_
s	UBTOTAL of Disbursements This Page (optional)						<u> </u>						3	3000.	00	
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NAME OF COMMITTEE (In Full)	e and address of any political co	illillillee lo	SOIICIL COITLIT	Julions no	iii sucii cc	minilee	
American Council of Life Insurers Political	Action Committee						
Full Name (Last, First, Middle Initial)			Transa	ction ID:	1336041	2	
Mike Dewine For US Senate				f Disburse		V V	V
Mailing Address PO Box 340188			0,3	1	^D / Y	2006	
City Columbus	State Zip Code OH 43234		Amour	t of Each	Disbursen	nent this P	eriod
Purpose of Disbursement	40204		- [1000.0	00
<u> </u>		011					
Candidate Name Sen. Mike DeWine		Category/ Type					
	ement For: 2006 Primary General						
President State: OH District: 1	Other (specify)						
Full Name (Last, First, Middle Initial)			_		10.17.100	. -	
People for English				iction ID: f Disburse		7	
Mailing Address 104 Hume Ave				1 / D ₂	D / Y	ž 0 0 6	Υ
Maining Address 104 Huffle Ave			1 -				
City Alexandria	State Zip Code VA 22301		Amour	t of Each	Disbursen	nent this P	eriod
Purpose of Disbursement	22001	-	- L.			1000.0	00
On the Name		011					
Candidate Name Phil English		Category/ Type					
X	ement For: 2006						
Senate X President	Primary General Other (specify)						
State: PA District: 3	Cirior (opcomy)						
Full Name (Last, First, Middle Initial)				ction ID:		1	
ERICPAC			M	f Disburse		V V	Υ
Mailing Address 209 Pennsylvania Ave, S	E		0.3	1	3 / Y	2006	
City Washington	State Zip Code DC 20003		Amour	t of Each	Disbursen	nent this P	eriod
Purpose of Disbursement	20003		- []			1500.0	00
		011					
Candidate Name		Category/ Type					
Office Sought: House Disburse	ement For:						
Senate President	Primary General						
State: District:	Other (specify)						
SUBTOTAL of Disbursements This Page (optional)				•	•	3500.0	0
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
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	ie and address of any political co	minitee to sc	mon continuu	11011 6110IT	i Sucii CON	minuee	
NAME OF COMMITTEE (In Full) American Council of Life Insurers Politica	I Action Committee						
Full Name (Last, First, Middle Initial)			Transact	ion ID: 1	3369334	į	
Federal City Caterers				Disbursem		V * V *	V
Mailing Address 1119 12th Street, NW			0 3	13		ž 0 Ŏ 6	Ť
City	State Zip Code		Amount o	of Each D	isburseme	ent this P	eriod
Washington Purpose of Disbursement	DC 20005					536.2	25
In-Kind Contribution to New Democratic C		011				555.2	
Candidate Name		Category/ Type					
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		In-Kind (New Der PAC			n	
Full Name (Last, First, Middle Initial)					0.47.4000		
Fossella for Congress				Disbursem	_		V
Mailing Address P.O. Box 060248 New Dorp Station			0 3	2 4		ž 0 Ď 6	
City Staten Island	State Zip Code NY 10306		Amount	of Each D	isburseme		-
Purpose of Disbursement		011				1000.0	0
Candidate Name Vito Fossella		Category/ Type					
X X	ement For: 2006 Primary General Other (specify)						
Full Name (Last, First, Middle Initial)					0515010		
Barney Frank for Congress				Disbursem	_		V
Mailing Address 38 Ivy Street, SE			0 3	29		ž 0 Ŏ 6	
City Washington	State Zip Code DC 20003		Amount of	of Each D	isburseme	ent this P	eriod
Purpose of Disbursement	DC 20003	011				1000.0	0
Candidate Name Barney Frank		011 Category/ Type					
· ·	ement For: 2006 Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional						2536.2	5
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Any Information copied from such Reports and Statem										3	
or for commercial purposes, other than using the name	e and address of any political co	mm	ttee to s	olicit	contrib	utions fr	om such	comn	nittee		
NAME OF COMMITTEE (In Full)	Author Organistics										
/ American Council of Life Insurers Political	Action Committee										
Full Name (Last, First, Middle Initial)				Т	ransad	tion ID:	: 133595	593			
Jim Gerlach for Congress Committee						Disburs			* \	V	
Mailing Address 911 Welsh Ayres Way					0 3	/ D	3 /	Ź	0 Ď 6	T	
	State Zip Code			А	mount	of Each	Disburse	emen	t this P	erio	t
Downingtown Purpose of Disbursement	PA 19335			- [1	000.0	00	П
r drpose of bisbursement		Ō.	11		•		-	_	-	-	_
Candidate Name Jim Gerlach		Cate Ty	gory/ pe								
	ment For: 2006										
Senate X President	Primary General Other (specify)										
State: PA District: 6	Other (apeciny)										
Full Name (Last, First, Middle Initial)				Т	ransad	ction ID:	: 133601	32			
Growth and Prosperity PAC					ate of	Disburs	ement				
Mailing Address 217 Third Street, SE				1	0 3 M	/ D	3 /	Ž	0 ŏ 6	Y	
•	State Zip Code			A	mount	of Each	Disburse	emen	t this P	erio	 t
Washington Purpose of Disbursement	DC 20003			- [1	000.0	00	٦
Fulpose of Disbursement		0.	11	1	-			-			_
Candidate Name		Cate Ty	gory/ pe								
° H	ment For:										
Senate President	Primary General Other (specify) ▼										
State: District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Т	ransad	ction ID:	: 134749	 931			
Hagel for Senate Committee						Disburs					
Mailing Address PO Box 241497					0 3	/ D2	24	ž	0 Ď 6	Y	
•	State Zip Code			А	mount	of Each	Disburse	-men	t this P	erio	t
Omaha Purpose of Disbursement	NE 68124			- [•		1	500.0	00	\neg
		0.	11				-			-	_
Candidate Name Chuck Hagel		Cate Ty	gory/ pe								
	ment For: 2008										
	Primary General										
State: NE District: 1	Other (specify)										
				Г							$\overline{}$
SUBTOTAL of Disbursements This Page (optional)			<u> </u>					3	500.0	0	
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SCHEDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check onli	NUMBER:		PAGE	22 / 30	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	· —	24 28c	25 29	26 30b
Any Information copied from such Reports and State							
or for commercial purposes, other than using the na	ne and address of any political col	mmittee to so	ilcit contribu	tions from Si	ucn comm	iittee	
NAME OF COMMITTEE (In Full) American Council of Life Insurers Political	l Action Committee						
Full Name (Last, First, Middle Initial)			Transact	tion ID: 135	14962		
People with Hart				Disbursemen		· // · \	·
Mailing Address 217 Executive Drive Suite 102			03	^D 29	Ź	0 0 6	
City Cranberry Township	State Zip Code PA 16066		Amount of	of Each Disb	oursement	this Pe	eriod
Purpose of Disbursement	Г				. 1	000.00)
Candidate Name		011					
Melissa Hart		Category/ Type					
Senate President	sement For: 2006 K Primary General Other (specify) ▼						
State: PA District: 4							
Full Name (Last, First, Middle Initial) Hawkeye PAC				tion ID: 133 Disbursemen			
Mailing Address P.O. Box 7255			0 ^M 3 ^M	[/] 13	/ Y Y 2	0 0 6	
-							
City Des Moines	State Zip Code IA 50309		Amount	of Each Disb	ursement	this Pe	eriod
Purpose of Disbursement					. 2	000.00)
Candidate Name		011 Category/ Type					
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial)			Transact	tion ID: 134	7/871		
Hooley for Congress				Disbursemen			
Mailing Address 320 Massachusetts Avo	nue, NE		0 3	^D 24	y y	0 0 6	
City Washington	State Zip Code DC 20002		Amount o	of Each Disb	ursement	this Pe	eriod
Purpose of Disbursement		·			1	000.00)
Candidate Name Darlene Hooley		011 Category/ Type					
	sement For: 2006 C Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)				4(00.00	
age (optional	,	<u> </u>		• • •	-	-	-
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Any Information copied from such Reports and Statem							
or for commercial purposes, other than using the name	e and address of any political co	IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	icit contribu	uons trom	such com	mittee	
NAME OF COMMITTEE (In Full) American Council of Life Insurers Political	Action Committee						
Full Name (Last, First, Middle Initial)			Transact	ion ID: 10	360836		
Steve Israel for Congress Committee				isbursem		· · · · ·	V
Mailing Address PO Box 777			0,3	13		ž 0 ŏ 6	
City Deer Park	State Zip Code NY 11729		Amount o	of Each Di	sburseme		•
Purpose of Disbursement	Г					1000.0	0
Candidate Name Steve Israel		011 Category/ Type					
X	ment For: 2006 Primary General Other (specify)	1,00					
Full Name (Last, First, Middle Initial)			Transact	ion ID: 13	3360774		
3. Johnson for Congress Committee				isbursem	ent		
Mailing Address P.O. Box 1986			0 3	13	/ Y	ž 0 ŏ 6	Y
City New Brighton	State Zip Code CT 06050		Amount o	of Each Di	sburseme		-
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Candidate Name Nancy Johnson		Category/ Type					
X	ment For: 2006 Primary General Other (specify)						
Full Name (Last, First, Middle Initial)			Transact	ion ID: 13	2260002		
Stephanie Tubbs Jones for US Congress			Date of D	isbursem	ent	YYY	Υ
Mailing Address 611 Pennsylvania Ave, S #353			0"3 "	13		ž 0 ŏ 6	
City Washington	State Zip Code DC 20003		Amount o	of Each Di	sburseme	nt this P	eriod
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Candidate Name Stephanie Jones		011 Category/ Type					
-	ment For: 2006 Primary General Other (specify)						
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Full Name (Last, First, Middle Initial)				Tra	ansac	tion ID:	133603	62			
Keep Our Majority PAC				_		Disburse				V	
Mailing Address 104 Hume Ave				C	3	/ 1	3 /	ž	0 Ď 6	Y	
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Full Name (Last, First, Middle Initial)				Tr	ansar	tion ID:	133594	44			
Sue Kelly for Congress						Disburse					
Mailing Address 1707 Prince Street, #	7				3	/ D 1	^D / `	ž	0 ŏ 6	Y	
Trori inice Street, #	1				_						
City Alexandria	State Zip Code VA 22314			Ar	nount	of Each	Disburse	emen	this P	erio	t —
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Candidate Name Sue Kelly		Cate	, ,								
	oursement For: 2006	Тур) e								
Senate	X Primary General										
President	Other (specify)										
State: NY District: 19											
Full Name (Last, First, Middle Initial) Lucas for Congress						t ion ID: Disburse	134749	30			
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Mailing Address Post Office Box 1726 Post Office Box 1726					3	2	4	. 2	0 0 6		
City Oklahoma City	State Zip Code OK 73101			Ar	nount	of Each	Disburse	emen	this P	erio	t
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Candidate Name Frank Lucas		Cate									
	oursement For: 2006	Тур	<i>.</i> -	-							
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President	Other (specify)										
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\rangle	American Council of Life Insurers Political	Action Committee											
_	Full Name (Last, First, Middle Initial)						Trans	acti	on ID	: 133	36031	8	
Α.	Pomeroy for Congress							of D м	isburs		nt	V V	V
	Mailing Address Post Office Box 75214						0 3	IVI	′ _ 1	13		žoŏ	6
	City Washington	State Zip Code DC 20013					Amou	ınt o	f Each	n Disk	bursem	ent this	Period
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	Candidate Name Earl Pomeroy				egory/ vpe								
	X	ement For: 2006 Primary General Other (specify)											
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В.	Full Name (Last, First, Middle Initial) Pomeroy for Congress								-		47493	2	
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	Mailing Address Post Office Box 75214						0 3		2	2 4		žoŏ	6
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C.	Full Name (Last, First, Middle Initial) Price For Congress								on ID		35986 ⁷ nt	7	
	Mailing Address PO Box 425						0 ^M 3	М	/ D	1 3	/ Y	ž 0 ŏ	6 ^Y
	City Roswell	State Zip Code GA 30077					Amou	ınt o	f Each	n Dist	bursem	ent this	Period
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	Candidate Name Rep. Thomas Price, M.D.		Ca	ate	11 egory/ vpe	1							
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American Council of Life Insurers Political	Action Committee						
Full Name (Last, First, Middle Initial)			Transac	ction ID:	133600 ⁻	17	
Pryce for Congress				Disburse		* V * V *	V
Mailing Address 145 E. Rich Street			0,3 ,	1	^D / Y	ž o ŏ e	<u>. </u>
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Candidate Name Deborah Pryce		Category/ Type					
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President	Other (specify) ▼						
State: OH District: 15							
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Rangel for Congress			Date of	Disburse	ment	YY	Υ
Mailing Address PO Box 5577 Manhattanville Station			0.3	2	4	ž 0 ŏ 6	
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Charles Rangel		Category/ Type					
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Mailing Address P.O. Box 65796			03 M	/ D 1	3 / Y	ž 0 ŏ 6	Y
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$ \rangle$	American Council of Life Insurers Political	Action Co	mmittee												
Α.	Full Name (Last, First, Middle Initial) Jim Ryun For Congress							Trans Date					60108		
	Mailing Address PO Box 826							0 3	М	/ D	13	3	Y	ž o ŏ	6 ^Y
	City Topeka	State KS	Zip Code 66601					Amou	ınt o	f Eac	h C	Disbu	ırseme		
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	Candidate Name Rep. Jim Ryun		2000	C		egory/ ype									
		ement For: Primary Other (spe	2006 General												
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В.	Full Name (Last, First, Middle Initial) Team Sununu							Date	of D	isbur	sen	nent			
	Mailing Address PO Box 500							0 ^M 3	М	/ D	2 4	4	Y	žoŏ	6 ^Y
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	Candidate Name John Sununu			С	at	egory/ ype									
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	State: NH District: 2														
C.	Full Name (Last, First, Middle Initial) The Freedom Project							Date	of D	isbur	sen	nent	74870		
	Mailing Address 111 C Street, SE							0 3	М	/ D	2 4	4	Y	ž 0 ŏ	6 ^Y
	Washington	State DC	Zip Code 20003					Amou	int o	f Eac	h C	Disbu	ırseme		
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	NAME OF COMMITTEE (In Full) American Council of Life Insurers P	olitical Action Committee											
Α.	Full Name (Last, First, Middle Initial) Tiberi for Congress				Date		sburse			, , , , ,	Y		
	Mailing Address 1200 Trinity Drive				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
	City Alexandria	State Zip Code VA 22314			Amou	nt of	Each	Disburse	-			od	
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	Candidate Name Patrick Tiberi		l .	egory/ /pe									
	Office Sought: X House Senate President State: OH District: 12	Disbursement For: 2006 X Primary General Other (specify)											
В.	Full Name (Last, First, Middle Initial)	Ill Name (Last, First, Middle Initial) attering by Windows Transaction ID: 13369271 Date of Disbursement											
	Mailing Address 1125 North Royal	Street			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
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	Candidate Name Mr. Juan Vargas	egory/ /pe											
	Office Sought: X House Senate President State: CA District: 51	Disbursement For: 2006 X Primary General Other (specify)			In-Kin	In-Kind Contribution							

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\rangle	NAME OF COMMITTEE (In Full) American Council of Life Insurers Polit	tical Action Co	ommittee														
۹.	Full Name (Last, First, Middle Initial) Juan 'Chuy' Hinojosa for Senate						Date o	of Dis	sburse	me	36096 nt		o ŏ 6	Y			
	Mailing Address District 20 P.O. Box 1421					03 / 13 / 20				006							
	City Austin	State TX	Zip Code 78767				Amou	nt of	Each	Dis	bursen		-	_	d		
	Purpose of Disbursement Juan Hinojosa, STATE SENATE TX	TE TX 011				500.00											
	Candidate Name TX Sen. Juan Hinojosa				egory/ /pe												
	Office Sought: House X Senate President State: TX District: 20	Oursement For: X Primary Other (spe	2008 General ecify) ▼				Juan I TE TX	Hind	ojosa,	S1	TATE	SE	NA-				

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